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CONFIRMATION NO. 6526

Bib Data Sheet

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/254,148	06/11/1999 RULE	705	3624	663/35631

APPLICANTS

JOHN WARWICK ADCOCK, VICTORIA, AUSTRALIA;  
RODNEY ALFRED JOHN REYNOLDS, VICTORIA, AUSTRALIA;

\*\* CONTINUING DATA \*\*\*\*\*

THIS APPLICATION IS A 371 OF PCT/AU97/00548 08/27/1997

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

AUSTRALIA PO 2011 08/29/1996

\*\* SMALL ENTITY \*\*

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	Examiner's Signature	Initials	STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance			AUSTRALIA	4	56	2

ADDRESS

Barnes & Thornburg  
750 17th Street N. W.  
Suite 900  
Washington, DC 20006

TITLE

AUTOMATIC ELECTRONIC FUNDS TRANSFER SYSTEM AND METHOD

FILING FEE RECEIVED 1683	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )		
<input type="checkbox"/> 1.18 Fees ( Issue )		
<input type="checkbox"/> Other _____		
<input type="checkbox"/> Credit		

NUMBER 09/254,148	FILING DATE 06/11	CLASS 705	GROUP ART UNIT 2761 212	ATTORNEY DOCKET NO. 663/35631
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APPLICANT

JOHN WARWICK ADCOCK, VICTORIA, AUSTRALIA; RODNEY ALFRED JOHN REYNOLDS, VICTORIA, AUSTRALIA.

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\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*

VERIFIED

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*

VERIFIED THIS APPLN IS A 371 OF PCT/AU97/00548 08/27/97

\*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED AUSTRALIA PO 2011 08/29/96

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 07/06/99 \*\* SMALL ENTITY \*\*

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY AUX	SHEETS DRAWING 4	TOTAL CLAIMS 56	INDEPENDENT CLAIMS 2
Verified and Acknowledged 	Examiner's Initials _____ Initials _____				

ADDRESS

BARNES & THORNBURG  
FRANKLIN TOWER BLDG  
1401 EYE STREET NW  
SUITE 500  
WASHINGTON DC 20005

PHONE: (202)289-1313

TITLE

AUTOMATIC ELECTRONIC FUNDS TRANSFER SYSTEM AND METHOD

FILING FEE RECEIVED \$1,683	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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